

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Greene  
Serial No.: 10/667,751  
Filed: 09/22/2003  
For: External Fixation Device for Cranialmaxillofacial Distraction  
Art Unit: 3732  
Examiner:

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**REQUEST TO CORRECT INVENTORSHIP  
UNDER 37 CFR 1.48(a)**

This communication is a request to amend the application as filed to correct the inventorship under 37 CFR 1.48(a).

The application was filed with an executed declaration naming Michael T. Greene as the sole inventor.

The correct inventorship is Michael T. Greene and Thomas S. Johnston.

The following documents are attached:

- (1) a newly executed declaration by both co-inventors;
- (2) a statement from Thomas S. Johnston that the error in inventorship occurred without deceptive intent;
- (3) the processing fee of \$130 as set forth in 37 CFR 1.17(i);
- (4) written consent of the assignee

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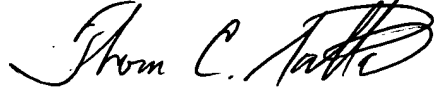
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The undersigned certifies that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.

1/13/04  
Date

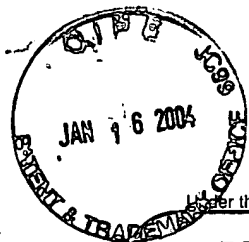
Thomas C. Saitta  
Thomas C. Saitta

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Thomas C. Saitta". The signature is fluid and cursive, with a large, stylized initial "T" and "S".

Thomas C. Saitta, Reg. No. 32102  
Attorney for Applicant

Rogers Towers, P.A.  
1301 Riverplace Blvd.  
Suite 1500  
Jacksonville, FL 32207  
904-346-5518  
904-396-0663 (fax)



PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**☐Declaration  
Submitted  
With Initial  
Filing

OR

☐Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	T0217.10.U
First Named Inventor	Greene et al.
COMPLETE IF KNOWN	
Application Number	10/667,751
Filing Date	09/22/2003
Art Unit	
Examiner Name	

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

External Fixation Device for Cranialmaxillofacial Distraction

(Title of the Invention)

the specification of which

☐

is attached hereto

OR

☐

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.


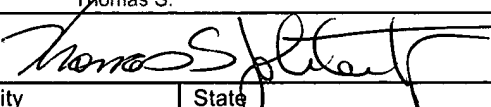
[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input type="checkbox"/> Customer Number: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>		<b>OR</b> <input checked="" type="checkbox"/> Correspondence address below	
Name Thomas C. Saitta - Rogers Towers, P.A.			
Address 1301 Riverplace Boulevard - Suite 1500			
City Jacksonville		State Florida	ZIP 32207
Country US	Telephone 904-346-5518	Fax 904-396-0663	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Michael T.		Family Name or Surname Greene	
Inventor's Signature 		Date 1/11/04	
Residence: City Jacksonville	State Florida	Country US	Citizenship US
Mailing Address P.O. Box 50249			
City Jacksonville	State Florida	ZIP 32250	Country US
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Thomas S.		Family Name or Surname Johnson	
Inventor's Signature 		Date 1/11/04	
Residence: City Jacksonville	State Florida	Country US	Citizenship US
Mailing Address P.O. Box 50249			
City Jacksonville	State Florida	ZIP 32250	Country US
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			



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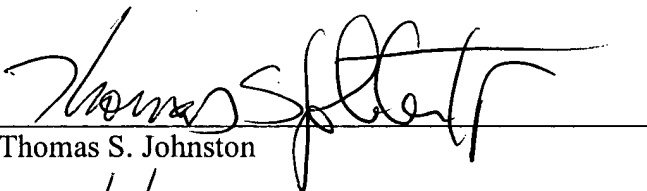
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STATEMENT BY ADDED INVENTOR

This application was filed naming incorrect inventorship, in that the undersigned was omitted.

The undersigned states that the error in inventorship in this matter occurred without deceptive intent.

  
\_\_\_\_\_  
Thomas S. Johnston  
1/11/04  
\_\_\_\_\_  
Date



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**CONSENT OF ASSIGNEE TO CORRECTING INVENTORSHIP**

This application was filed naming incorrect inventorship, in that only inventor Michael T. Greene was designated as inventor, when the true inventors are Michael T. Greene and Thomas S. Johnston.

Inventor Michael T. Greene executed an assignment document on September 17, 2003, assigning the rights in this application to KLS-Martin, Inc.

The undersigned assignee hereby consents to correction of the inventorship in this application to properly reflect co-inventors Michael T. Greene and Thomas S. Johnston.

KLS-Martin, Inc.

By: 

duly authorized to act on behalf of  
KLS-Martin, Inc.

1/2/04  
Date